POSITION	INITIALS	ID NO.	DATE					
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O.I.P.E. CLASSIFIER	911	30	811					
FORMALITY REVIEW	CV	503	1/15/01					
RESPONSE FORMALITY REVIEW	74	1113	04-16-02					

## **INDEX OF CLAIMS**

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_	(Through numeral) Canceled	A	Appeal
	Restricted	0	Objected

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If more than 150 claims or 10 actions staple additional sheet here

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